



Attorney Docket No. 1148/015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group Art Unit 3626 : PATENT APPLICATION

Examiner Natalie A. Pass :

In re application of : **SYSTEM FOR MONITORING HEALTH,
WELLNESS AND FITNESS**

TELLER ET AL :

Serial No. 09/595,660 :

Filed June 16, 2000 :

AMENDMENT

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on February 26, 2004, Applicants respectfully request that the amendments contained herein be entered in the instant application. Concurrently herewith, Applicants have filed a Request for Continued Examination under 37 C.F.R. §1.114.

I, Philip E. Levy, in accordance with 37 C.F.R. 1.8(a), hereby certify that I have a reasonable basis to expect that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope bearing sufficient postage and addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:


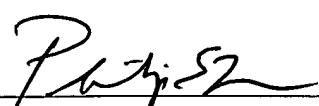
May 26, 2004

Date of Deposit

Philip E. Levy

Signature

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AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 1148/015	
Applicant(s): Teller et al.					
Serial No. 09/595,660	Filing Date June 16, 2000	Examiner Natalie A. Pass	Group Art Unit 3626		
Invention: SYSTEM FOR MONITORING HEALTH, WELLNESS AND FITNESS					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. <input type="checkbox"/> A verified statement to establish Small Entity status under 37 CFR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	58 -	103 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	4 -	5 =	0 x	\$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0525 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: May 26, 2004		
Philip E. Levy, Esq. Reg. No. 40,700 Metz Lewis LLC 11 Stanwix Street, 18th Floor Pittsburgh, PA 15222 (412) 918-1100			<div style="border: 1px solid black; padding: 10px;"> <p>I certify that this document and fee is being deposited on May 26, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p>  Signature of Person Mailing Correspondence Philip E. Levy, Esq. Typed or Printed Name of Person Mailing Correspondence </div>		
cc:					

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